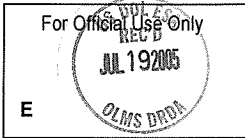


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>4413</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>William</u> <u>A</u> <u>Bernard</u> P.O. Box, Bldg., Room No., if any Street <u>6360 Dexter Ann Arbor Road</u> City <u>Dexter</u> State <u>Michigan</u> ZIP Code + 4 <u>48130</u>	4. Name, file number, and address of labor organization. Name <u>Teamsters Local Union No. 164</u> Labor Organization File Number <u>033285</u> P.O. Box, Building and Room Number, if any Street <u>3700 Ann Arbor Road</u> City <u>Jackson</u> State <u>Michigan</u> ZIP Code + 4 <u>49202</u>
5. Position in labor organization. <u>Secretary-Treasurer, Business Agent</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.  7.b. Amount. 

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u>William A. Bernard</u>	On <u>7-7-05</u> <u>587-764-1108</u> Date Telephone Number

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name Groom Law Group, Chartered

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1701 Pennsylvania Ave, NW, Ste 1200

City Washington

State District of Columbia ZIP Code + 4 20006-5811

## 9. Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Michigan Conf. of Teamsters Welfare Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 2700 Trumbull Avenue

City Detroit

State Michigan ZIP Code + 4 48216-1269

## 11.a. Nature of such dealing.

Groom Law Group, Chartered provides legal services, primarily with regard to ERISA, to the Michigan Conference of Teamsters Welfare Fund. Mr. Bernard is a Trustee of the Michigan Conference of Teamsters Welfare Fund.

## 11.b. Approximate dollar value of such dealing.

\$157,000

## 12.a. Nature of interest held or income received.

On 12/21/2004, Groom Law Group, Chartered gave a holiday gift to Mr. Bernard consisting of a hat (\$12 value) and a shirt (\$25 value).

## 12.b. Amount.

\$37

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name Michigan Conf. of Teamsters Welfare Fund

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 2700 Trumbull Avenue

City Detroit

State Michigan ZIP Code + 4 48216-1269

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

## 11.a. Nature of such dealing.

MI Conf. of Teamsters Welfare Fund is a Taft-Hartley multi-employer health & welfare fund providing benefits to employees represented by the Teamsters Union. Mr. Bernard is a Fund Trustee and received reimbursement for attending educational conferences.

## 11.b. Approximate dollar value of such dealing.

## 12.a. Nature of interest held or income received.

See Form LM-30 Additional Information Page attached.

## 12.b. Amount:

\$2,960

C. **Received from any employer** (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

## 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

## 14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

## 14.b. Amount of payment.

**Form LM-30 Additional Information Page**  
**Page 1 of 1**

Name of Reporting Employee: William A. Bernard  
Fiscal Year Covered From 1/1/2004 Through 12/31/2004

**Part B, Item 12.a.**

On 3/11/2004, the Michigan Conference of Teamsters Welfare Fund paid \$1,205 to the International Foundation-Conf. for the registration fee and hotel deposit for Mr. Bernard to attend the IFEBP Trustees and Administrators Institute on 6/12 – 6/16/2004 in Lake Tahoe, NV. The reservation was cancelled and a refund was received by the Michigan Conference of Teamsters Welfare Fund in the amount of \$905 on 6/16/2004. The difference between the deposit amount and refund amount was a cancellation fee in the amount of **\$300** that the Michigan Conference of Teamsters Welfare Fund paid on behalf of Mr. Bernard. On 12/18/2003, the Board of Trustees approved Mr. Bernard's attendance at the conference and reimbursement for registration and conference costs.

On 9/1/2004, the Michigan Conference of Teamsters Welfare Fund paid **\$1,350** to the International Foundation-Conf. for the registration fee and hotel deposit for Mr. Bernard to attend the IFEBP Health Care Management Conference & Fraud Prevention Institute on 11/13 – 11/19/2004 in Monterey, CA. On 7/28/2004, the Board of Trustees approved Mr. Bernard's attendance at the conference and reimbursement for registration and conference costs.

On 11/24/2004, the Michigan Conference of Teamsters Welfare Fund paid **\$1,310** to the International Foundation-Conf. for the registration fee and hotel deposit for Mr. Bernard to attend the IFEBP 51<sup>st</sup> Annual Employee Benefits Conference on 11/13 – 11/16/2005 in Honolulu, HI. On 11/23/2004, the Board of Trustees approved Mr. Bernard's attendance at the conference and reimbursement for registration and conference costs.